

**BEST AVAILABLE COPY**

Patent Application

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2000

Application or Docket Number

*09/890280*

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|                                  |                      |                          |
|----------------------------------|----------------------|--------------------------|
| TOTAL CLAIMS                     |                      |                          |
| FOR                              | NUMBER FILED         | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | <i>40</i> minus 20 = | <i>20</i>                |
| INDEPENDENT CLAIMS               | <i>1</i> minus 3 =   |                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |                      | <input type="checkbox"/> |

**SMALL ENTITY TYPE** ☐

**OR OTHER THAN SMALL ENTITY**

| RATE      | FEE |
|-----------|-----|
| BASIC FEE |     |
| X\$ 9=    |     |
| X40=      |     |
| +135=     |     |
| TOTAL     |     |

| RATE      | FEE |
|-----------|-----|
| BASIC FEE |     |
| X\$18=    |     |
| X80=      |     |
| +270=     |     |
| TOTAL     |     |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|----------------------------------|-------|------------------------------------|---------------|
|   |                                  |       |                                    |               |
| Total   | <i>36</i>                        | Minus | <i>40</i>                          | =             |
| Independent   | <i>1</i>                         | Minus | <i>3</i>                           | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

**SMALL ENTITY**

**OR OTHER THAN SMALL ENTITY**

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X40=             |                |
| +135=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X80=             |                |
| +270=            |                |
| TOTAL ADDIT. FEE |                |

*11/12/04*

| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|----------------------------------|-------|------------------------------------|---------------|
|   |                                  |       |                                    |               |
| Total   | <i>37</i>                        | Minus | <i>40</i>                          | =             |
| Independent   | <i>3</i>                         | Minus | <i>3</i>                           | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X40=             |                |
| +135=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X80=             |                |
| +270=            |                |
| TOTAL ADDIT. FEE |                |

| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|----------------------------------|-------|------------------------------------|---------------|
|   |                                  |       |                                    |               |
| Total   |                                  | Minus |                                    | =             |
| Independent   |                                  | Minus |                                    | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X40=             |                |
| +135=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X80=             |                |
| +270=            |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.